Hospital Program Summary

"Continuing Our Service to Veterans and Their Families"

Auxiliary _____ Number of Members _____

Reporting Period for Summary: April 1, 2019 through March 31, 2020
Due Date to the Department Chairman - **April 20, 2020**

1. How many Auxiliary members volunteer in ANY VA and/or Non-VA medical facilities:
   Number of Volunteers: _____
   Total Hours for the year: _____

2. Number of NEW volunteers recruited: Adults: _____ Youth: _____

3. Describe events that your Auxiliary sponsored/conducted in ANY VA and/or non-VA Medical Facility.

4. Total amount spent on all Hospital projects: $ _____

5. Did your Auxiliary submit a Volunteer for *Outstanding Hospital Volunteer of the Year?*

6. How did your Auxiliary promote Suicide Prevention and Mental Health Awareness?
   Did your Auxiliary purchase the Department Tear Drop Pins? If so how many _____
   How did members use the Pins to promote Veterans and Military Suicide Awareness?

7. How did your Auxiliary recognize volunteers throughout the year?

8. How did your Auxiliary use publicity and/or media to recruit volunteers and involve the community?

9. How many Hospital Volunteer Service Pins did your Auxiliary present to members: _____

10. What volunteer recognition events did your Auxiliary conduct/participate in this year?

11. How did your Auxiliary participate in the *Veterans Voices Writing Project?* (For example, subscribing to the magazine, making a donation, or volunteering with the program.)

12. How did your Auxiliary use the *Hospital Program Guide* this year?

13. How did your Auxiliary promote the *VA office of Research and Development?*

14. How did your Auxiliary promote the Hospital Program during your Family Freedom Festival event(s) .

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